

List of Establishments

28 B. ADDITIONAL LOCATIONS OF OPERATION

Column (a) - List separately any establishments of your company and its subsidiaries that were not included on the PRE-IDENTIFIED LOCATIONS OF OPERATION but were in operation and engaged in the industry printed in the mailing address section on the first page of the consolidated report form. If your company operates at locations for which you have received separate report forms, do not list them, instead complete those forms. For acquired establishments that you list, complete column (c2).

Column (b) - Report number of employees and payroll for full- and part-time employees working at each establishment whose payroll was reported on your Internal Revenue Service Forms 941, Employer's Quarterly Federal Tax Return. Include part-time operations. Do not combine data for establishments. If book figures are not available, employment and payroll for each establishment, please provide your best **estimates**.

Column (c1) - Enter the code from the MAJOR ACTIVITY CODES list that best describes the activity of each establishment and specify the principal products or services.

Column (c2) - Complete for acquired establishments.

MAJOR ACTIVITY CODES FOR COLUMN (c1)

- 60** - Life insurance carrier - direct
- 61** - Accident and disability income insurance - direct
- 62** - Health insurance carrier - direct
- 63** - Health and medical plan - direct
- 64** - Property and casualty insurance carrier - direct
- 65** - Surety insurance carrier - direct
- 66** - Title insurance carrier - direct
- 67** - Other insurance carrier - direct
- 68** - Reinsurance carrier

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IMPORTANT - DO NOT DUPLICATE ESTABLISHMENTS PRELISTED IN 28 A.

Company Establishments and Subsidiaries <i>(Enter Employer Identification Number (EIN), establishment name, your store or plant number, if any, address of physical location, including ZIP Code.)</i>				Employment and Payroll			Major Activity in 2012 <i>(Enter code from the MAJOR ACTIVITY CODES list and specify the principal products or services.)</i>			
(a)				(b)			(c1)			
EIN				2012			Code	Specify		
□ □ - □ □ □ □ □ □ □ □				Number of employees for pay period including March 12			□ □			
Name				□ □ □ □ □ □ □ □			(c2) Former Owner or Operator			
Secondary name			Store/Plant No.	First quarter payroll (January-March 2012)			Name of former owner or operator			
Physical location (Number and street)				\$Bil.	Mil.	Thou.	Mailing address (Number and street, P.O. Box, etc.)			
□ □ □ □ □ □ □ □				□	□	□				
City, town, village, etc.		State	ZIP Code	2012			City, town, village, etc.		State	ZIP Code
				Annual payroll						
Date establishment opened or is expected to open	Month	Day	Year	\$Bil.	Mil.	Thou.	Date acquired		Month	Year
	□ □	□ □	□ □ □ □	□	□	□			□ □	□ □ □ □

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28 B. ADDITIONAL LOCATIONS OF OPERATION - Continued

(a) Company Establishments and Subsidiaries				(b) Employment and Payroll			(c1) Major Activity in 2012			
EIN				2012			Code	Specify		
[][] - [][][][][][][][][][]				Number of employees for pay period including March 12			[][]			
Name				[][][][][][][][][][]			(c2) Former Owner or Operator			
Secondary name		Store/Plant No.		First quarter payroll (January-March 2012)			Name of former owner or operator			
Physical location (Number and street)				\$Bil.	Mil.	Thou.	Mailing address (Number and street, P.O. Box, etc.)			
[][][][][][][][][][]				[][][][][][][][][][]						
City, town, village, etc.		State	ZIP Code	2012			City, town, village, etc.		State	ZIP Code
[][][][][][][][][][]		[][]	[][][][][][]	Annual payroll			[][][][][][][][][][]		[][]	[][][][][][]
Date establishment opened or is expected to open	Month	Day	Year	\$Bil.	Mil.	Thou.	Date acquired		Month	Year
[][][][][][][][][][]	[][]	[][]	[][][][][][]	[][][][][][][][][][]	[][][][][][][][][][]	[][][][][][][][][][]	[][][][][][][][][][]		[][]	[][][][][][]
EIN				2012			Code	Specify		
[][] - [][][][][][][][][][]				Number of employees for pay period including March 12			[][]			
Name				[][][][][][][][][][]			(c2) Former Owner or Operator			
Secondary name		Store/Plant No.		First quarter payroll (January-March 2012)			Name of former owner or operator			
Physical location (Number and street)				\$Bil.	Mil.	Thou.	Mailing address (Number and street, P.O. Box, etc.)			
[][][][][][][][][][]				[][][][][][][][][][]						
City, town, village, etc.		State	ZIP Code	2012			City, town, village, etc.		State	ZIP Code
[][][][][][][][][][]		[][]	[][][][][][]	Annual payroll			[][][][][][][][][][]		[][]	[][][][][][]
Date establishment opened or is expected to open	Month	Day	Year	\$Bil.	Mil.	Thou.	Date acquired		Month	Year
[][][][][][][][][][]	[][]	[][]	[][][][][][]	[][][][][][][][][][]	[][][][][][][][][][]	[][][][][][][][][][]	[][][][][][][][][][]		[][]	[][][][][][]
EIN				2012			Code	Specify		
[][] - [][][][][][][][][][]				Number of employees for pay period including March 12			[][]			
Name				[][][][][][][][][][]			(c2) Former Owner or Operator			
Secondary name		Store/Plant No.		First quarter payroll (January-March 2012)			Name of former owner or operator			
Physical location (Number and street)				\$Bil.	Mil.	Thou.	Mailing address (Number and street, P.O. Box, etc.)			
[][][][][][][][][][]				[][][][][][][][][][]						
City, town, village, etc.		State	ZIP Code	2012			City, town, village, etc.		State	ZIP Code
[][][][][][][][][][]		[][]	[][][][][][]	Annual payroll			[][][][][][][][][][]		[][]	[][][][][][]
Date establishment opened or is expected to open	Month	Day	Year	\$Bil.	Mil.	Thou.	Date acquired		Month	Year
[][][][][][][][][][]	[][]	[][]	[][][][][][]	[][][][][][][][][][]	[][][][][][][][][][]	[][][][][][][][][][]	[][][][][][][][][][]		[][]	[][][][][][]

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